Commentary on the Multi-Agency Approach to the investigation of SUDI

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In this issue of Current Paediatric Reviews PJ Fleming presents the English multi agency approach to the investigation of sudden unexpected death in infancy (1). The author is probably the world’s most experienced expert on death scene investigation in such cases, and the present paper is thus both interesting and important. Due to new legislation in the UK by April 1, 2008, death scene investigation has to be performed in all cases of sudden infant death. The professionals involved in the investigation are police officers, social workers and paediatricians. Forensic/paediatric pathologists are indirectly involved in the diagnostic work. The purpose of the death scene investigation is firstly to provide care, support and information to bereaved families, secondly, to identify potentially preventable factors or evidence of neglect or abuse. Furthermore, important aims are the identification of potentially contributory epidemiological or environmental factors, and thus to accumulate knowledge for the prevention or risk reduction of sudden deaths in the future (1).

Death scene investigation is mandatory when using the SIDS diagnosis. The NIH diagnosis of 1989 (2) says:

The sudden death of an infant under one year of age which remains unexplained after thorough case investigation, including performance of a complete autopsy, examination of death scene, and review of the clinical history.

The Stavanger definition (3), as well as the San Diego definition (4), use the phrase the circumstances of death, which implies investigation of the death scene.

In some countries death scene investigations are performed by the police, e.g. in Denmark. In the United States death scenes are examined by investigators working for the medical examiner or coroner, or the police, or in some cases a combination of both in the same case.

In Norway, where the police was withdrawn from the death scene in 1991 (5), a research project with death scene investigation by experts was performed between 2001 and 2004. The project included Southeast Norway, 2.5 million people, and was a voluntary offer to the families. There were 64 sudden unexpected deaths in the period, in 52 cases families were offered death scene investigation, and 46 families participated. The death scene investigation was performed by a police expert (not employed by the police) together with the forensic pathologist who had performed the autopsy. The investigation included an interview of the parents and a reconstruction by means of a doll. In a case conference, including all experts involved (forensic pathologists, pediatricians, radiologists, microbiologists, neuropathologists, and police experts) all results were summarized. In 31 of the 64 cases the conclusion was SIDS, whereas the remaining 33 were explained deaths. There were 17 cases of acute illness, 6 home accidents, 7 cases of neglect, 1 case of abuse, 3 homicide cases, 2 cases of infanticide and one case of medical maltreatment. Interestingly, in the four years period prior to the project we only saw 2 cases of neglect and in the five years after 2004 we have only discovered one case. These figures clearly demonstrate that to disclose neglect, you have to see the death scene.

The Norwegian research project also included a visit by a crisis psychologist five weeks after the death scene investigation. A thorough qualitative interview was performed in the first
25 families; 31 of the interviewed persons were very positive, 3 were positive, 1 was neutral. There were no negative or very negative responses. The specialist in crisis psychology concluded that the death scene investigation offered the families a structured approach and qualified information on an early stage in the bereavement process. The positive reaction by the parents may be somewhat surprising since the death scene was carried out by forensic and police experts, not by treating health care staff.

The Norwegian Government has now decided that death scene investigation is to be offered as a voluntary health service to families who experience sudden unexpected death in infants and small children. Parliament, however is requiring a mandatory investigation by experts. The Governmental layers claim that a mandatory approach would be against the Norwegian Constitution which says that “house inquisition” can only be allowed in criminal cases, and that a mandatory death scene also collides with the European Declaration of Human Rights. The Government has delegated the responsibility of the voluntary death scene investigation to the National Institute of Public Health, Section of Psychological Health. They have hired the Institute of Forensic Medicine to perform investigation. Parliament has unanimously decided to change the law regulating criminal procedure to allow the police to investigate sudden deaths in infants and children without the requirement of “reasonable grounds for suspicion”. Until legislative changes are made, the death scene investigation will be offered to the families as a voluntary health service.

It seems that the UK, thanks to Peter Fleming and his co-workers, is in front concerning death scene investigation in sudden infant death. Different countries have different traditions and legislation concerning professional secrecy and legal protection. However, we should all look to the UK for the sake of the legal protection of most unprotected children and their families. A mandatory and universally accepted death scene investigation both secure the right for protection of small children and it prevents destructive gossip.

1) Fleming PJ. The English Multi-Agency approach to the investigation.  